

CAUSE # _____

_____	*	In the Small Claims Court
Plaintiff		
Vs.	*	Precinct _____
_____	*	Collin County, Texas
Defendant		

PLAINTIFF'S STATEMENT OF CLAIM

_____, Plaintiff, whose mailing address is:

Street City State Zip

_____ County, Texas, and telephone number is: _____

_____, Defendant, whose **physical** address

Street City State Zip

_____ County, Texas, is justly indebted to him in the sum of

\$ _____ plus court costs of \$ _____ for:

plus attorney fees if applicable

Plaintiff

On this the _____ day of _____, 20____, the
above named person appeared and swore on an affidavit under oath that the
above information set out herein is true and correct.

Subscribed and Sworn to before me this _____ day of
_____, 20____.

Clerk of the Court or Notary Public